State of South Dakota



Candidate's or Committee's Report of Receipts and Expenditures

Candidates and candidate committees: File in the office who PACs, political party, ballot question and other committees:	ere you filed your nominating petition. File with Elections Department, Secretary of State's Office, 500 E Capitol Ave., Pierre, SD 57501-5070	RECEIVED
***************************************	300 E Capitol Ave., Fiche, 3D 37301-3070	FEB-2-7 2006
	specific instructions on completing this report.	S.D. SEC. OF STATE
	shall de Democrats	
Complete Mailing Address P. 6. (30x 1071 Britton, S.D. 576	130
Name of Person Making Report Nalua	Mistoffers Daytime Phone Number 60	5-441-2763
If you are a candidate, what office are you se	eking?	
If you are a ballot question committee, indica reporting period and whether the measure was	ate which measure(s) the committee was involved was supported or opposed.	ith during the
Type of Report (See pages 4 & 5 of Guidelin	ne Book) 12-31-05	-
For Reporting Period Ending (See pages 4 &	5 of Guideline Book)	
The following verification must be completed VERIFICATION OF PERSON MAKING R		•••••
I Nelva Kristo Fferso this report and to the best of my knowledge:	(print name legibly), certify that I hand belief it is true, correct and complete.	ave examined
Date: 2-12-06	Candidate Signature or Signature of Committee Treasurer or Chairperson	day of
Revised July 2001		Johnson, Old
Sorry but I don't recol		Chi Vielson
gitting This butires & I NEMEN	4 0 € 60 € 60 € 60 € 60 € 60 € 60 € 60 €	SECRETARY OF STATE
thraw Gay Thing Out	TEYON hove 412 goes Tuns	LEY'
AsfarasI know This is The	my Phone th 13 685-448276	3
hast one. We don't even	1	
have ma otther law more.		

Schedule A – Direct Contributions and the same from pations on their respective lines below and on the next page. Any contributions on their respective lines below and on the next page. Any contributions on their respective lines below and on the next page. Any contribution an individual or political party and all contributions from PAC's must name, address and place of employment (if applicable) of the contribution. This schedule may be duplicated if you need more space, or you make the provided that the provi	cord of all contributors, but for the political parties and enter these substitution of more than \$100 or aggrest be entered as a separate item (it ator. Each type of contributor has	ns as unitemized gate during a calendar emized) giving the their own section for
needule is used for reporting all direct contributions. You must keep a rece all contributions of \$100 or less from individuals and the same from putions on their respective lines below and on the next page. Any contribution an individual or political party and all contributions from PAC's muname, address and place of employment (if applicable) of the contribution. This schedule may be duplicated if you need more space, or you make the same and the same from page 1.	cord of all contributors, but for the political parties and enter these surtion of more than \$100 or aggrest be entered as a separate item (intor. Each type of contributor has any attach additional sheets of pages.	ms as unitemized gate during a calendar emized) giving the their own section for er.
		*\$ \$
ized Contributions from Individuals:		\$ \$
d Contributions from Individuals		\$ \$
Name Residence Address		\$ \$
		\$
		¢
		a
		\$
		\$
		\$
		ş
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
	7 5 0 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5	\$
		ъ •
		\$
		\$
		\$
		\$
	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	\$
		\$
		\$
		\$
		\$
		\$
		\$
f Itemized Contributions from Individuals:		*\$

or the reporting period ending		
Schedule A – I	Direct Contributions (continued)	
nitemized Contributions from Political Parties:		*\$
temized Contributions from Political Parties		
Party Name	Address	
		\$
		\$
otal of Itemized Contributions from Political Par	ties:	*\$
emized Contributions from Political Action Com	mittees (PAC's) - All contributions from PAC	's must be itemized.
PAC Name	Address	
		\$
		\$ \$
		\$
		\$
		\$
		•
		\$
		\$ \$ \$
		\$ \$
		\$ \$
		\$\$ \$
		\$\$ \$
		\$ \$
		\$
		\$
		\$
		\$ s s s s s s s s s s s s s s s s s s s
		\$
		\$
		\$\$\$\$\$

Name of Candidate or Committee:		(1)
For the reporting period ending:		
Schedule B - List on this schedule fund-raising events held to raise contributor gives more than \$100 or their contribution contributions must be itemized on Schedule A.	Fund-Raising Events Proceeds money for the candidate and the net proceeds d n results in their aggregate being more than \$100	erived from each event. If a 3 in the calendar year, those
Type or Name of Event		Net Proceeds
		1
Total:		
contributor, residence address and place of employm Nature of Non-Cash Contribution	ent must be reported. Name, Residence Address & Place of Employment	Estimated Value
	· · · · · · · · · · · · · · · · · · ·	
Total:		
Sch Use this schedule to report any refunds, interest earn	edule D - Other Income ed or other income which is not a direct contribution	ution.
Source of Income		Amount
Total:	111	

For the reporting	period ending:				
		Schodule E Expenditures			
This schedule is to repo expenses. All other exp	ort all expenditures relat	Schedule E – Expenditures ing to a candidate's campaign. Line items have been prov All contributions to candidates and committees must	vided for reporting common be listed individually.		
Expenses		Contributions Made to Candidates and Committees			
Item	Amount	Name of Candidate or Committee	Amount		
Advertising		*			
Consulting					
Postage	11.25				
Printing			<u> </u>		
Rent Salaries					
Telephone					
Travel		Annual service and a service a	The second secon		
Utilities					
List other expense items below	List other expense amounts below				
Meeting room	10.00				

			:		
,					
	 				
					
		*			
Total Expenditures:			21.25		

Name of Candidate or Committee:_

For the reporting period ending:				
Schedule F - Debts and Obligations This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.				
Owed to:	Purpose:	Amount		
···	ψ.			
W-M-				
-				
		44		
		· · · · · · · · · · · · · · · · · · ·		
		:		
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	9			
WAL THE TOTAL OF T				
Total Obligations:				

Name of Candidate or Committee:

Ńа	me of Candidate or Committee:	
For	r the reporting period ending:	
	Summary Page s summary sheet will give a brief outline of all campaign finance activity during this report in the schedules previously completed.	ing period. Please transfer all totals
1.	Amount on hand, if any, at the beginning of the reporting period:	\$_\$0\$6
2.	Receipts	
	Schedule A - Direct Contributions \$	
	Schedule B - Fund-Raising Events \$	**
an and an	Schedule C - In Kind Contributions \$	
	Schedule D - Other Income \$	
	Total of all Receipts \$	
3.	Total Monetary Receipts (A+B+D)	\$
4.	Candidate's Personal Contribution to Own Campaign	\$
5.	Monetary Loans to Candidate or Committee During Reporting Period	\$
6.	Monetary Loans Repaid During Reporting Period	\$
7.	Expenditures - Schedule E	\$ 21.25
8.	Unpaid Obligations - Schedule F \$	
9.	Amount on hand at the close of this reporting period. * This should equal lines $(1+3+4+5) - (6+7)$	\$ <u>39.41</u>

		A.			
e e				<u>.</u>	
			±		
				*	
				1.00 1.002	
	14-				
			*		